Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FASTKIT CORP Account Number : I20100000009 Phone

: (305)599-0839 Fax Number : (305)592-9591

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

yosvanialmanza@gmail.com

FLORIDA LIMITED LIABILITY CO. YAS TRADING, LLC

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 1 |
| Page Count | 02 |
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Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

| YAS TRADING | , LLC | | |
|--|---|--|---------------------|
| | (Must and with the words "L | imited Liability Company, "L.L.C.," or "LLC.") | |
| ARTICLE II The mailing a | | s of the principal office of the Limited Lia | ability Company is: |
| Principal Off | ice Address: | Mailing Address: | |
| 13251 SW 71S | T ST | 13251 SW 71ST ST | E x 2 |
| MIAMI, FL 3318 | 33 | MIAMI, FL 33183 | 2013 FEB |
| (The Limited Liab business entity w | ility Company cannot serve as it ith an active Florida registration. | Registered Office, & Registered Agent's sown Registered Agent. You must designate an individual of the registered agent are: | Signature |
| | | Name | |
| | 7500 NW 54TH ST | | |
| | Florid | a street address (P.O. Box NOT acceptable) | |
| | MIAMI | 33166 | |
| | IVIIAIVII | FL00100 | |

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Rogistered Agent's Signature (REQUINES)

(CONTINUED)

Page 1 of 2

| Title: | | Name and Address: | |
|--|--|--|----------|
| | = Manager | <u>.</u> | |
| MOROV | I" = Managing Member | • | |
| MGRM | · | YOSVANI ALMANZA | |
| | | 13251 SW 71ST ST | |
| | | MIAMI, FL 33183 | |
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| *************************************** | | | 2013 FEB |
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| CLE V: I | Effective date, if other th | nan the date of filing: (OPTIONAL) e must be specific and cannot be more than five busine ting.) | AL) |
| CLE V: I effective o or 90 de | Effective date, if other the | e must be specific and cannot be more than five busine | AL) |
| CLE V: I effective to or 90 de | Effective date, if other the date is listed, the date ays after the date of fil RED SIGNATURE: | e must be specific and cannot be more than five busine ing.) Mosway | AL) |
| CLE V: I effective to or 90 de | Effective date, if other the date is listed, the date ays after the date of fil RED SIGNATURE: | e must be specific and cannot be more than five busine | AL) |
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| CLE V: I effective to or 90 de | Effective date, if other the date is listed, the date ays after the date of file RED SIGNATURE: Signature of a seconstitutes an affirmation I am aware that any false constitutes a third degree | member or an authorized representative of a member. tion 608.408(3), Florida Statutes, the execution of this document in under the penalties of perjury that the facts stated herein are true. In the information submitted in a document to the Department of State e felony as provided for in s.817.155, F.S.) | AL) |
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Page 2 of 2